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EL791171987US

**Declaration and Power of Attorney  
for Patent Application**

**Attorney's Docket No.: P1406**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CHEMICAL SOLUTION FOR ELECTROPLATING A COPPER-ZINC ALLOY THIN-FILM**

the specification of which  is attached hereto.  
 was filed on \_\_\_\_\_  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) (Number/Country/Date Filed/Priority Claims: Yes/No)

No

I hereby claim the benefit under Title 35, United States Code, Section 120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this application (list application Serial No./Filing Date/Status):

N/A

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

F. David LaRiviere Reg. No. 27,207	May Lin DeHaan Reg. No. 42,472	Victor Flores Reg. No. 29,638	Elizabeth S. Sussex Reg. No. 46,391
Mark E. Andrews Reg. No. 43,472	C. Kelley Crossman Reg. No. 34,312	Don R. Mollick Reg. No. 28,972	Jim Schroeder Reg. No. 48,686
Richard J. Roddy Reg. No. 27,688	Bradley Botsch Reg. No. 34,552	Harry A. Wolin Reg. No. 32,638	Rajendra Jaipershad Reg. No. 44,168
Paul S. Drake Reg. No. 33,491	Michael Caywood Reg. No. 37,797	Elizabeth A. Apperley Reg. No. 36,428	Daniel R. Collopy Reg. No. 33,667
Diana Roberts Reg. No. 36,654			

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SEND CORRESPONDENCE TO:

LaRiviere, Grubman & Payne, LLP  
P.O. Box 3140  
Monterey, CA 93942-3140

DIRECT TELEPHONE CALLS TO:

Name: May Lin DeHaan  
Telephone: (831) 649-8800

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or 1st or joint inventor: SERGEY LOPATIN

Inventor's Signature: Sergey Lopatin Dated: 2/12/2002  
Residence: 1000 Kiely Blvd., #66 Santa Clara, California 95051 Citizenship: Belarus  
Post Office Address: 1000 Kiely Blvd., #66 Santa Clara, California 95051

Full name of 2nd or joint inventor: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
Residence: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_

Full name of 3rd or joint inventor: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
Residence: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_

Full name of 4th or joint inventor: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
Residence: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_

Full name of 5th or joint inventor: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
Residence: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_